

U.S. DEPARTMENT OF AGRICULTURE  
Economic Research Service  
**GRANT AND ASSISTANCE TYPE COOPERATIVE AGREEMENT BUDGET**

|  |  |                        |          |                                   |  |   |  |
|--|--|------------------------|----------|-----------------------------------|--|---|--|
| <b>Recipient Name:</b>   |  |                        |          | DURATION PROPOSED                 |  | ERS USE ONLY                                  |  |
| <b>Agreement No.</b>   |  |                        |          | Months: _____                     |  | Months: _____                                 |  |
| PRINCIPAL INVESTIGATOR(S) PROJECT DIRECTOR(S)  |  |                        |          | FUNDS<br>REQUESTED BY<br>PROPOSER |  | FUNDS<br>APPROVED BY<br>ERS<br>(If different) |  |
| A. Salaries and Wages  |  | ARS FUNDED WORK MONTHS |          |                                   |  |   |  |
| 1. No. of Senior Personnel   |  | Calendar               | Academic | Summer                            |  |   |  |
| a. ____ (Co)-PI(s)/PD(s) . . . . .   |  |                        |          |                                   |  |   |  |
| b. ____ Senior Associates . . . . .  |  |                        |          |                                   |  |   |  |
| 2. No. of Other Personnel (Non-Faculty)  |  |                        |          |                                   |  |   |  |
| a. ____ Research Associates-Postdoctorate  |  |                        |          |                                   |  |   |  |
| b. ____ Other Professionals . . . . .  |  |                        |          |                                   |  |   |  |
| c. ____ Graduate Students . . . . .  |  |                        |          |                                   |  |   |  |
| d. ____ Pre-Baccalaureate Students . . . . .   |  |                        |          |                                   |  |   |  |
| e. ____ Secretarial-Clerical . . . . .   |  |                        |          |                                   |  |   |  |
| f. ____ Technical, Shop, and Other . . . . .   |  |                        |          |                                   |  |   |  |
| <b>Total Salaries and Wages</b>  |  |                        |          |                                   |  |   |  |
| B. Fringe Benefits (If charged as Direct Costs)  |  |                        |          |                                   |  |   |  |
| <b>C. Total Salaries, Wages, and Fringe Benefits</b> <span style="float: right;"><i>(A plus B)</i></span>  |  |                        |          |                                   |  |   |  |
| D. Nonexpendable Equipment<br><i>(Attach supporting data. List items and dollar amounts for each item.)</i>  |  |                        |          |                                   |  |   |  |
| E. Materials and Supplies  |  |                        |          |                                   |  |   |  |
| F. Travel  |  |                        |          |                                   |  |   |  |
| 1. Domestic (Including Canada)   |  |                        |          |                                   |  |   |  |
| 2. Foreign (List destination and amount for each trip)   |  |                        |          | N/A                               |  | N/A   |  |
| G. Publication Costs/Page Charges  |  |                        |          |                                   |  |   |  |
| H. Computer (ADPE) Costs   |  |                        |          |                                   |  |   |  |
| I. All Other Direct Costs (Attach supporting data. List items and dollar amount.<br>amount. Details of subcontracts, including work statements and budget,<br>should be explained in full in proposal) |  |                        |          |                                   |  |   |  |
| <b>J. Total Direct Costs (C through I)</b>   |  |                        |          |                                   |  |   |  |
| K. Indirect Costs (Specify rate(s) and base(s) for on off campus activity.)<br><i>(Where both are involved, identify itemized costs included in on off campus bases.)</i>                              |  |                        |          |                                   |  |   |  |
| <b>L. Total Direct and Indirect Costs (J plus K)</b>   |  |                        |          |                                   |  |   |  |
| <b>M. Less Residual Funds (If applicable)</b>  |  |                        |          |                                   |  |   |  |
| <b>N. TOTAL AMOUNT of this REQUEST (L minus M)</b>   |  |                        |          |                                   |  |   |  |
| <b>O. COST SHARING</b>   |  |                        |          |                                   |  |   |  |

COMMENTS